Case 3:07-cv-00026-MEF-SRW Do	cument 6 Filed 01/18/2007	Page 1 of 1
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: 	A. Signature X away (' table and a Ac B. Received by (Printed Name) C. Date of D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No	
c/o Daniel Jones, Warden W E Donaldson Correctional Facility Of Cmp Bruk		
100 Warrior Lane Bessemer, AL 35203	3. Service Type Certified Mail Registered Insured Mail C.O.D.	
3:07 W26	4. Restricted Delivery? (Extra Fee)	
2. Article Number (Transfer from service labs 7006 2760 0	1002 8193 0364	

Domestic Return Receipt

102595-0°

PS Form 3811, February 2004